

# **GRANT APPLICATION**

### SPECIALTY CROP BLOCK GRANT PROGRAM Federal Fiscal Year 2009

# Administered by Georgia Department of Agriculture

19 Martin Luther King Jr. Dr SW Atlanta, GA 30334

# **Application Requirements**

Complete all sections of the application and send **two (2)** copies to:

Specialty Crop Grant, Georgia Dept. of Agriculture, 19 Martin Luther King Jr. Dr. SW Atlanta, GA 30334.

E: grants@agr.state.ga.us

The application must be typed with 12 pt. font. All margins must be at least one inch. Additional materials that will assist the GDA in its evaluation of this project may be attached. All applications, attachments to applications and written materials received by the GDA are public records. Please, include an electronic copy (diskette, email) of this proposal with the paper copies. In developing your application, refer to the "Program Guidelines", "Budget Narrative Format", "Budget Template", "Unallowable and Allowable Costs", "Application Examples", and "List of Selected Items of Cost".

Completed applications must be <u>postmarked</u> or <u>hand-delivered</u> by <u>5:00 PM</u> on <u>July 17, 2009</u> to be considered during this granting cycle.

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Inquiries regarding the application process should be addressed to: Specialty Crop Grant Project Manager 19 MLK Jr Dr SW Atlanta, GA 30334

Email: grants@agr.state.ga.us

404-463-8875

# **Specialty Crop Block Grant Program - 2009**

Project Title:			
Specialty Crop Grant Request: S	\$	Total Project Cost:\$	
Requested Start Date:		Anticipated End Date:	
Applicant Organization:			
Organization's Operating Year:	(i.e.: Jan-Dec, Jul	y-June	
Mailing Address:			
Physical Address (if different):			
County			
Web site (if available):			
Telephone: (D) E-mail:	E)	FAX:	
Primary contact/title/contact info	ormation (if differer	nt from above):	
Authorized contract signer/title (fax and e-mail address):	if different from or	ganization, please include address,	telephone
Applicant's status: (check one)  Non profit - Classifica  State or local governn University, College Other:		1(c)(3), etc)	
Counties in Georgia the project  Statewide  County or counties (lis	·	one)	

# INSTRUCTIONS FOR COMPLETING APPLICATION

Each proposal should include the following information. Complete all information requested. Proposals that are incomplete and do not satisfy all the requirements are at risk of being disqualified and returned to the proposing organization without review. The acceptable font size is 12 pitch and all margins must be 1 inch. Information for each section should be specific and to the point but brief, as in the examples provided in Appendix A. Each proposal must be in the following format with numbered pages:

**I. Project Title and Abstract** – The following information should be included in this section:

Project Title: The title should adequately describe the project.

<u>Abstract:</u> Include a project abstract of 200 words or less. The project abstract must contain a summary of the proposed project suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of objectives and methods to be employed.

**II. Project Purpose** – The following questions should be addressed in this section: What is the specific issue, problem or need to be addressed by the project?

Why is the project important and timely?

What are the objectives of the project?

If the project is a state marketing program, how will the State ensure that funding is being used to solely enhance the competitiveness of eligible specialty crops?

Has the project been submitted to or funded by another Federal, State, or other grant program?

**III. Potential Impact -** This section should show how the project potentially impacts the specialty crop industry and/or the public rather than a single organization, institution, or individual. The following questions should be answered:

Who are the beneficiaries of the project?

How many beneficiaries will be impacted?

How will the beneficiaries be impacted by the project?

What is the potential economic impact of the project if available?

- **IV.** Expected Measurable Outcomes The following questions should be answered in this section.
- What is at least one distinct, quantifiable, and measurable outcome that directly and meaningfully supports the project's purpose and is of direct importance to the intended beneficiaries? The measurable outcome, when possible, should include the following:
  - GOAL
  - PERFORMANCE MEASURE
  - BENCHMARK

#### TARGET

- How will performance toward meeting the outcome(s) be monitored?
  - Define who your data sources are
  - How will data be collected
  - If using a survey, provide information on the nature of the questions that will be asked, the methodology to be used, and the population to be surveyed
  - If a draft questionnaire is available, you may want to include a copy with your application
- How will data gathered be used to correct deficiencies and improve performance, both as it is gathered and analyzed and in subsequent project periods?

Provide a timeframe when outcome measures will be achieved. Outcome oriented objectives may be long term that exceed the grant period.

**V. Work Plan** – The following information should be included in this section.

Identify the activities necessary to accomplish the project objectives. Make sure to include your performance monitoring/data collection plan activity described in the expected measurable outcome section in the work plan.

Indicate who will do the work of each activity. If collaborative arrangements or subcontracts are used, make sure you specify their role and responsibilities in performing project activities.

Include <u>timelines</u> for accomplishing each activity. Make sure to include the month and year the project is scheduled to begin.

The work plan section may be in any format you choose as long as it contains the appropriate information. Please refer to Appendix A for examples of work plans:

**VI. Budget Narrative** – Complete the **Budget Template** for each year of your project. Also include a budget narrative in paragraph format in order to determine if the costs are reasonable and allowable.

See Appendix D for guidance on preparing the budget narrative. See Appendix B for allowable and unallowable costs.

Describe and include value-estimates of any in-kind matching contribution, such as personnel services, equipment, etc. and cash matching funds. <u>Matching funds are not required</u>; however, applications that include matching funds will receive higher consideration than requests that are based solely on Specialty Crop grant funds. Matching funds may include in-kind resources or direct cash contributions. While there is no required percentage of matching funds, any funds committed as matching funds must be spent concurrently with USDA Specialty Crop Block Grant funds (i.e. past expenditures will not be counted as match).

For each additional funding partner, provide:

- Name of the funding organization
- Type of funding (grant, loan, private contribution)

- Amount and date received and/or current status
- A "Letter of Commitment" from the funding partner stating the amount of match.
- If grant funds have been requested from other sources pending approval identify the funding organization and amount applied for.
- **VII. Project Oversight** Describe the oversight practices that provide sufficient knowledge of grant activities to ensure proper and efficient administration. The following questions and information should be addressed in this section:

Who will oversee the project activities?

How will oversight be performed? Include timelines.

**VIII. Project Commitment** – Describe how all grant partners commit to and work toward the goals and outcome measures of the proposed project. Provide the following information in this section:

Who supports this project?

How will all grant partners work toward the goals and outcomes of the project?

**IX. Multi-state Projects.** Describe how the project in each state will collaborate effectively with related projects. Each state's project applicant participating in the multi-state project should submit the project to their State's Specialty Crop Block Grant Program and indicate which State is taking the coordinating role and the percent of the budget covered by each State.

Provide the following information in this section:

Describe how the project in each State will collaborate effectively.

Each state participating in the project should submit the project to their State's Specialty Crop Block Grant Program.

Indicate the State taking the coordinating role (State will be responsible for performance reporting)

Indicate the percent of the budget covered by each State.

#### X. Authorization:

By signing this Application, the Authorizing Agent is guaranteeing that the information contained in this Application is correct and verifiable. The Authorizing Agent is also affirming that the funds requested herein will be used for the specific purpose outlined in this Application and for no other purpose. (Attach a resolution of the governing body of the applicant organization, authorizing this person to submit the application in the name of the organization.)

# **ATTACHMENTS**

# IX. Biographical Sketches

Provide a resume or biographical sketch of each person who has primary responsibility for developing and implementing the proposal.

Information should clarify each person's project responsibilities, and highlight their qualifications.

# X. Letters of Support

Attach any letters providing evidence of support for the project.

# **AUTHORIZATION**

## **Authorized Officials Signature**

An authorized official of the organization **MUST** sign the following statements that will bind the organization to the representations made in the grant.

THE FUNDS GRANTED BY THE GEORGIA DEPT. OF AGRICULTURE WILL BE USED EXCLUSIVELY FOR THE PURPOSES FOR WHICH THEY ARE GRANTED.

THE INFORMATION PROVIDED IN THIS APPLICATION IS CORRECT AND COMPLETE AND THE PERSON SIGNING THIS APPLICATION IS AUTHORIZED TO BIND THE APPLICANT.

THE APPLICANT ASSURES THE GEORGIA DEPT. OF AGRICULTURE THAT IT WILL PERMIT AUDITS AND SITE VISITS FOR THE PROJECT DESCRIBED IN THIS APPLICATION.

THE APPLICANT UNDERSTANDS THAT THIS APPLICATION AND ALL ATTACHMENTS SUBMITTED WITH THIS APPLICATION ARE PUBLIC RECORDS.

Applicant Organization:		
Signed by:	Date:	
Print Name:		<del> </del>
Title:		
Witnessed By:		
Print Name:		